



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/180,892
	Filing Date	March 8, 2001
	First Named Inventor	Colin D. Frank
	Group Art Unit	2821
	Examiner Name	Ware, Cicely Q..
Total Number of Pages in this Submission	Attorney Docket Number	CE08555R

ENCLOSURES

(check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group {Appeal Notice, Brief, Reply Brief} <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below)
Remarks		

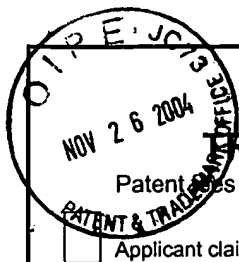
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Steven A. May	Registration No.	44,912
Signature			
Date	November 22, 2004		

CERTIFICATE OF TRANSMITTAL/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO to facsimile number _____ or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date listed below:

Typed or printed name	Nanette Orr		
Signature			
Date	November 22, 2004		



FEE

TRANSMITTAL

Patent fees are subject to annual revision

☐ Applicant claims small entity status. See 37 CFR 1.27

Complete if Known

Application Number	09/180,892
Filing Date	March 8, 2001
First Named Inventor	Colin D. Frank
Examiner Name	Ware, Cicely Q..
Group Art Unit	2821
Attorney Docket No.	CE08555R

-TOTAL AMOUNT OF PAYMENT

(\$)

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:

Deposit Account Number

502117

Deposit Account Name

Motorola, Inc.

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☐ Charge any additional fee(s) during the pendency of this application☐ Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	780	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES

Total Claims	Previously Paid**	Extra Claims	Fee from below	Fee Paid
Independent Claims	20	3	18	
			86	

Multiple Dependent

280 =

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	* Reissue independent claims over original patent

1205	18	2205	9	*Reissue claims in excess of 20 and over original patent
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SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late Provisional filing
1053	130	1053	130	Non-English specification
1812	2520	1812	2520	For filing a request for ex parte Reexamination
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action
1251	110	2251	55	Extension for reply within first month
1252	420	2252	210	Extension for reply within second month
1253	950	2253	475	Extension for reply within third month
1254	1480	2254	740	Extension for reply within fourth month
1255	2010	2255	1005	Extension for reply within fifth month
1401	330	2401	165	Notice of Appeal
1402	330	2402	165	Filing a brief in support of an appeal
1403	290	2403	145	Request for oral hearing
1451	1510	1451	1510	Petition to institute a public use proceeding
1452	110	2452	55	Petition to revive - unavoidable
1453	1330	2453	665	Petition to revive - unintentional
1501	1330	2501	665	Utility issue fee (or reissue)
1502	480	2502	240	Design issue fee
1503	640	2503	320	Plant issue fee
1460	130	1460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of IDS
8021	40	8021	40	Recording each patent assignment per property (times number of properties)
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))
1801	770	2801	385	Request for Continued Examination (RCE)
1802	900	1802	900	Request for expedited examination of a design application

Other fee (specify)

SUBTOTAL (3) (\$)

* Reduced by Basic Filing Fee Paid

SUBMITTED BY

Name (Print/Type) Steven A. May

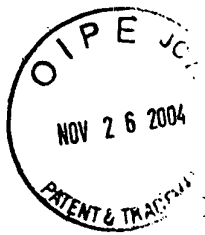
Signature

Registration No. 44,912

Date

Telephone 847-576-3635

November 22, 2004



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Colin D. Frank
Application No.: 09/180,892
Date Filed: March 8, 2001
Title: A METHOD AND APPARATUS FOR ANTENNA ARRAY BEAM FORMING

Group Art Unit: 2821
Examiner: Ware, Cicely Q.

INFORMATION DISCLOSURE STATEMENT (IDS)

Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313

SIR:

In accordance with 37 C.F.R. §1.56 and in compliance with 37 C.F.R. §§1.97 and 1.98, the references listed on attached Form PTO/SB/08 and/or subsequently identified herein, are for consideration by the United States Patent and Trademark Office. Pursuant to the Office waiving the requirement under 37 CFR 1.98 (a)(2)(i) for submitting a copy of each cited U.S. patent and each U.S. patent application publication for all U.S. national patent applications filed after June 30, 2003 and for all international applications that have entered the national stage under 35 USC §371 after June 30, 2003, copies of the reference are not submitted herewith.

I. ☐ THIS IDS IS BEING FILED UNDER 37 C.F.R. §1.97(b)-(d): (check only one box)

- a. ☐ within three months of the filing date of a national application other than a continued prosecution application under § 1.53(d); within three months of the date of entry of the national stage as set forth in § 1.491 in an international application; before the mailing date of a first Office Action on the merits; and/or before the mailing date of a first Office Action after the filing of a request for continued examination under § 1.114. No fee or statement is required.
- b. ☐ before the mailing date of any of a Final Office Action under 37 C.F.R. §1.113, a Notice of Allowance under 37 C.F.R. §1.311, or an action that otherwise closes prosecution in the application. Petition fee set forth in §1.17(p) is required unless a statement under 37 C.F.R. §1.97(e) is provided.
- c. ☐ on or before payment of the issue fee. Petition fee set forth in §1.17(p) and a statement under 37 C.F.R. §1.97(e) are required.

II. ☒ STATEMENT UNDER 37 C.F.R. §1.97(e) (check only one box, if applicable)

The undersigned hereby states that

- a. ☒ each item of information contained in the IDS was cited in a communication from a foreign Patent Office in a counterpart foreign application not more than three months prior to the filing of IDS; or
- b. ☐ no item of information contained in the IDS was cited in a communication from a foreign Patent Office in a counterpart foreign application, and to knowledge of the person signing the statement after making reasonable inquiry, no item of information contained in the IDS was known to any individual designated in 37 C.F.R. 1.56(c) more than three months prior to the filing of this statement, or
- c. ☐ some of the items of information contained in the IDS were cited in a communication from a foreign Patent Office. As to this information, the undersigned states that each item of information contained in the IDS was cited in a communication from a foreign Patent Office in a counterpart foreign application not more than three months prior to the filing of this IDS. As to the remaining information, the undersigned hereby states that no item of this remaining information contained in the IDS was cited in a communication from a foreign Patent Office in a counterpart foreign application or, to the knowledge of the person signing the statement after making reasonable

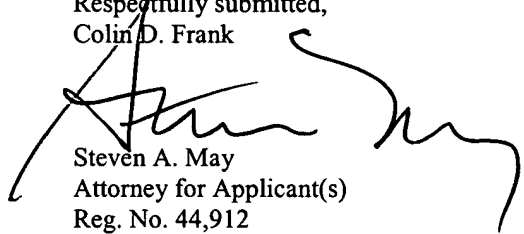
inquiry, no item of information contained in the IDS was known to any individual designated in 37 C.F.R. 1.56(c) more than three months prior to the filing of this statement.

III. PAYMENT OF FEES

- ☐ A check in the amount of _____ is enclosed for the above-identified fee(s).
☐ Please charge Deposit Account **502117** in the amount of \$____ for the above-indicated fee(s). Enclosed is a Fee Transmittal in duplicate.
☒ If Applicant has overlooked any additional fees, or if any overpayment has been made, the Commissioner is hereby authorized to credit or debit Deposit Account **502117**. Enclosed is a Fee Transmittal in duplicate.
☐ Two Copies of this paper are attached for Deposit Account charges and debits.

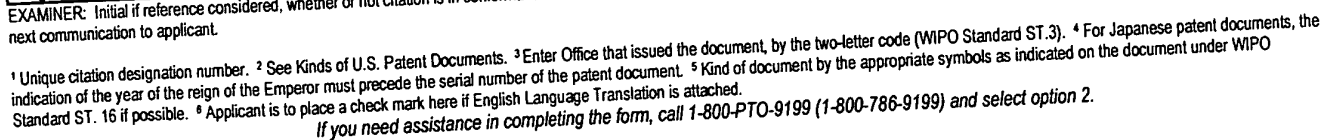
The above references are being cited only in the interests of candor and without any admission that they constitute statutory prior art or contain matter which anticipates the invention or which would render the same obvious, either singly or in a combination, to a person of ordinary skill in the art.

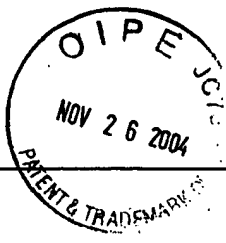
Respectfully submitted,
Colin D. Frank


Steven A. May
Attorney for Applicant(s)
Reg. No. 44,912
Tel. 847-576-3635

MOTOROLA, INC.
Customer Number 22917

Enclosures: ☒ Information Disclosure
 ☒ Statement by Applicant
 ☒ References
 ☒ Foreign Search Report
 ☐ Other:





**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Complete if Known

Application Number	09/180,892
Filing Date	March 8, 2001
First Named Inventor	Colin D. Frank
Group Art Unit	2821
Examiner Name	Ware, Cicely Q..
Attorney Docket Number	CE08555R

Sheet

of

NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
		FARSAKH C. ET AL.: "Spatial Covariance Based Downlink Beamforming in a SDMA Mobile Radio System", IEEE Transactions on Communications, IEEE Inc., New York, US, vol. 46, no. 11, November 1, 1998, pages 1497-1506.	

Examiner Signature		Date Considered	
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation, if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English Language Translation is attached.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.